

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)...	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date				
Final Original	1	2	3	4	5
1	✓	✓	✓	✓	✓
2		✓	✓	✓	
3		✓	✓		
4		✓	✓		
5		✓	✓		
6		✓	✓		
7		✓	✓		
8		✓	✓		
9		✓	✓		
10					
11		✓	✓		
12		✓	✓		
13		✓	✓		
14		✓	✓		
15		✓	✓		
16		✓	✓		
17		✓	✓		
18		✓	✓		
19		✓	✓		
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26		✓	✓		
27		✓	✓		
28		✓	✓		
29		✓	✓		
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31		✓	✓		
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43		✓	✓		
44		✓	✓		
45		✓	✓		
46		✓	✓		
47		✓	✓		
48		✓	✓		
49		✓	✓		
50		✓	✓		

Claim	Date		
Final	Original	1	2
51	✓	✓	✓
52	✓	✓	✓
53	✓	✓	✓
54	✓	✓	✓
55	✓	✓	✓
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90	✓	✓	✓
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Claim	Date						
Final Original							
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If more than 150 claims or 10 actions
staple additional sheet here

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